

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

2013 APR -3 AM 11:17

Date Received
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CITY OF VISTA
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2013 JAN 30 AM 11:14

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

Ritter, Judy K

1. Office, Agency, or Court

Agency Name

City of Vista

Mayor

Division, Board, Department, District, if applicable

Your Position

► If filing for multiple positions, list below or on an attachment.

Agency: Buena Sanitation District

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County

☒ County of San Diego

☒ City of Vista

☒ Other Buena Sanitation District

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-

The period covered is ____/____/____, through December 31, 2012.

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ Assuming Office: Date assumed ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election year ____ and office sought, if different than Part 1: ____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

1/28/13
(month, day, year)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Judy Ritter

▶ 1. BUSINESS ENTITY OR TRUST

Judy Ritter Inc

Name

702 Bel Air Dr W, Vista, Ca 92084

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$0 - \$1,999
☐ \$2,000 - \$10,000
☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Partnership ☐ Sole Proprietorship ☒ Corporation ☐ Other

YOUR BUSINESS POSITION President/CEO

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☐ \$0 - \$499 ☒ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

☐ None

Coldwell Banker

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$0 - \$1,999
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
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IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☐ Partnership ☐ Sole Proprietorship ☐ Other

YOUR BUSINESS POSITION

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

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☐ \$1,001 - \$10,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

☐ None

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

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Name of Business Entity, if Investment, or
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IF APPLICABLE, LIST DATE:

____/____/12 ____/____/12
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Judy Ritter

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Judy Ritter Inc

ADDRESS (Business Address Acceptable)

702 Bel Air Dr W, Vista, Ca 92084

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Real Estate Sales

YOUR BUSINESS POSITION

Realtor

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address
City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

2012 JUL 11 PM 2:45

SCHEDULE D **Income – Gifts**

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Mayor Judy Ritter
--

<p>► NAME OF SOURCE</p> <p><u>Moonlight Cultural Foundation Opening Night</u></p> <p>ADDRESS (Business Address Acceptable)</p> <p><u>1400 Vale Terrace, Vista CA 92084</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p><u>non-profit fundraising support the Moonlight Theatre</u></p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u>6 / 27 / 12</u></td> <td><u>\$ 35.00</u></td> <td><u>1 Dinner Morris Vance</u></td> </tr> <tr> <td><u>6 / 27 / 12</u></td> <td><u>\$ 25.00</u></td> <td><u>1 show Morris Vance</u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u>6 / 27 / 12</u>	<u>\$ 35.00</u>	<u>1 Dinner Morris Vance</u>	<u>6 / 27 / 12</u>	<u>\$ 25.00</u>	<u>1 show Morris Vance</u>	<u> / / </u>	<u>\$</u>	<u> </u>	<p>► NAME OF SOURCE</p> <p> </p> <p>ADDRESS (Business Address Acceptable)</p> <p> </p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p> </p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> <tr> <td><u> / / </u></td> <td><u>\$</u></td> <td><u> </u></td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>	<u> / / </u>	<u>\$</u>	<u> </u>
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Comments: _____

2013 JUN -7 PM 2:28

SCHEDULE D Income - Gifts

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name

Mayor Judy Ritter

► NAME OF SOURCE (Not an Acronym)

Vista Fire Fighters Association IAFF Local 4107

ADDRESS (Business Address Acceptable)

P.O. Box 1119, Vista, CA 92085-1119

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Fire Fighters

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 19 / 12	\$ 50.	Holiday Gift Basket
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

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